

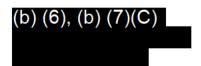
# UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 20 901 MARKET ST STE 400 SAN FRANCISCO, CA 94103-1738

Agency Website: www.nlrb.gov Telephone: (415)356-5130 Fax: (415)356-5156

Agent's Direct Dial: (415)356-5146

January 29, 2013



Dear (b) (6), (b) (7)(C)

Pursuant to our conversation, enclosed is a Charge against Employer form. If you wish to file this charge with us, please do the following:

- ✓ Make any necessary corrections on the form
- ✓ Fill in any incomplete spaces
- ✓ Sign and date the form where indicated at the bottom
- ✓ Return the form to the above address or fax number

You may also wish to keep a copy of the charge for yourself. Once we receive a signed charge from you, we will give it a case number and assign a Board agent to investigate the case. We will then send you a letter telling you the case number and the name of the investigator.

Please remember that to be timely, your charge must be filed <u>and served on the charged party</u> within six months of the alleged unlawful actions. We normally send a copy of the charge to the charged party, but if you are running close to the 6-month deadline, be advised that it is your responsibility to see that the Employer receives a copy of the charge within the 6-month period. Feel free to contact me if you have any questions or need further assistance. If I am not in, please ask to speak to the Information Officer.

Very truly yours,

DAVID REEVES Field Attorney

DV:djd

INTERNET FORM NLRB-501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
20-CA-097727	2/5/2013	

INS.	TOI	ICT	יייי	ue.

File an original with NLRB Regional Director for the region in which th		ring.
	GAINST WHOM CHARGE IS BROUGHT	h Tol No
a. Name of Employer		b. Tel. No. 707.446.4408
d/b/a McDonald's		c. Cell No.
		0. 3313.
		f. Fax No.
d. Address (Street, city, state, and ZIP code) 817 Leisure Town Road	e. Employer Representative (b) (6), (b) (7)(C)	g. e-Mail
Vacaville, CA 95687	(5) (6), (6) (1)(6)	g. e-iviali
Vacaville, OA 33307		
		h. Number of workers employed 20
Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	20
Restaurant	Food	
k. The above-named employer has engaged in and is engaging	in unfair labor practices within the meaning of se	ction 8(a), subsections (1) and (list
subsections)		bor Relations Act, and these unfair labor
practices are practices affecting commerce within the meanin		-
within the meaning of the Act and the Postal Reorganization A		man practices and daily commerce
2. Basis of the Charge (set forth a clear and concise statement	of the facts constituting the alleged unfair labor o	practices)
Within the past six months the above-named Emplo		· <u>—</u>
activities in complaining about the Employer's failur		<b>—</b> ·
	o to tomoth otato lath rogarating root poin	odo ana lanon broaks.
	* *	•
	RECEIVED	
(b) (6), (b) (7)(C) ng charge (if labor organization, give full	NLRB, REGION 20.	
(b) (6), (b) (7)(C) is charge (if labor organization, give this	name, including local name and number)	
	2013 FEB -5 A II: 21	
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)	SAN FRANCISCO. CA	
	OANT NANCISCU. CA	4c. Cell No.
		4d. Fax No.
		-
		4e, e-Mail (b) (6) (b) (7)(C)
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organization of wh	ich it is an affiliate or constituent unit (to be filled	in when charge is filed by a labor
organization)		
C DECLADATION		Tol No
DECLARATION  I declare that I have read the above charge and that the statements a	are true to the best of my knowledge and belief	Tel. No. (b) (6), (b) (7)(C)
(b) (6) (b) $(7)(C)$	(0) (1) (7) (0)	
(b)	(6), (b) (7)(C)	Office, if any, Cell No.
(signature of representative or person making charge) (if	Print/type name and title or office, if any)	Faulli
		Fax No.
(h) (6) (h) (7)(0)		e-Mail
	A 1 7 - 1-7	
Address (D) (O), (D) (7)(C)	2-2-2013 (date)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

(b) (6), (b) (7)(C)

# CA CHARGE ASSIGNMENT SHEET

Support Staff Suspension

DATE FILED:	February 5, 2013	
Assigned to:	- Gibson (Agent)	(Agent)
Case Name C. C. Yin d/b/a McDe		(1.55)
Case No. 20-CA- 9772-	7	1 (
IA Category (III) II	I Target	Date: 3/26/13
10(j) potential: Yes	No Unknown	10(j) List 🗌
Discharge Organizing Campaign		
Allegations: 8(a)(1)	If this is an 8(a)(3) CA, enter number of	
Method of Contact Electronic	Phone Visit Visit	Written 🔀
I/O Assisted? Yes No 🗌	I/O Inquiry Number: 1-75710	
Bargaining Status (Check one)	Existing Contract Organizing	
		king Succeeding Contract
Dispute Location Vacaville	State: CA 95687	Solano
Does this case block any other? Ye		
Is there a "request to proceed" in the p	petition(s). Enter Petition case nur	nber(s)
CHECK ALL A	PPROPRIATE ALLEGATION COD	ES BELOW /
Is the Section 8(a)(1) allegation a de	rivative and may be deleted? Yes	□ No □
8(a)(1)	8(a)(3) continued	8(a)(5) continued
Coercive Actions (Surveillance, etc )	Lockout	Refusal to Recognize
Coercive Rules	Refusal to Consider/Hire Applicant (salting only)	Repudiation/Modification of Contract [Sec 8(d)/Unilateral Changes]
Coercive Statements (Threats, Promises of Benefits, etc.	Refusal to Reinstate Employee/Striker (e.g., Laidlaw)	Shutdown or Relocate (e.g., First National Maint ) Subcontract Work
Concerted Activities (Retaliation,	Retaliatory lawsuit	8(e)
Discharge, Discipline	Shutdown or Relocate/ Subcontract Unit Work	All Allegations against an Employer
Denial of Access	Union Security Related Actions	·
Discharge of supervisor (Parker- Robb Chevrolet)	8(a)(4)	
Robb Chevrolety	Changes in Terms & Conditions of Emplt	
Interrogation (including Polling)	Discharge (incl Layoff & Refusal to	
Lawsuits	Hire) • • • • • • • • • • • • • • • • • • •	
Weingarten	Refusal to Reinstate	
	Employee/Striker	
8(a)(2)	Shutdown or Relocate/Subcontract Unit Work	
Assistance	8(a)(5)	
Domination	Alter Ego	
Unlawful Recognition	Failure to Sign Agreement	
8(a)(3)	Refusal to Bargain/Bad Faith	
Changes in Terms & Conditions of Emplt	Bargaining (incl surface bargaining/direct dealing)	
Discharge (including Layoff & Refusal to Hire (not salting))	Refusal to Furnish Information Refusal to Hire Majority	
Discipline	, state to said the said the	
Is this a Related case? Yes	No O	
If yes, what is main case number?	Check here if above c	ase is the main number

### CA CHARGE ASSIGNMENT SHEET

Docket Checklist			
ER Information from NxGen printed		Completed file in Agent's mailbox	/
Original of charge filed in cabinet	/	Charge scanned into NxGen	/
Copy of Charge to Agent	/	NxGen completed by	1
Participant Sheet printed (Service Sheet)	/	Copy of Charge for reception	/
Letters saved in NxGen	/	Copy of Charge for FOIA	ノ
Case file label typed (check color)	/	Copy of Pink Sheet to Nelly	/
Case file assembled	/	By 4:45 pm, email Nelly that docket letters issued	
Category marked on case file			j
Target date marked on case file	/		

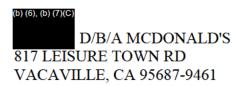


## UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 20 901 MARKET ST STE 400 SAN FRANCISCO, CA 94103-1738

Agency Website: www.nlrb.gov Telephone: (415)356-5130 Fax: (415)356-5156

February 5, 2013



Re: (b) (6), (b) (7)(c) d/b/a McDonald's Case 20-CA-097727

Dear (b) (6), (b) (7)(C)

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner ALAINA GIBSON whose telephone number is (415)356-5184. If this Board agent is not available, you may contact Supervisory Attorney CHRISTY KWON whose telephone number is (415)356-5175.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be

considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor any request to place limitations on our use of position statements or evidence beyond those prescribed by the Freedom of Information Act and the Federal Records Act. Thus, we will not honor any claim of confidentiality except as provided by Exemption 4 of FOIA, 5 U.S.C. Sec. 552(b)(4), and any material you submit may be introduced as evidence at any hearing before an administrative law judge. We are also required by the Federal Records Act to keep copies of documents gathered in our investigation for some years after a case closes. Further, the Freedom of Information Act may require that we disclose such records in closed cases upon request, unless there is an applicable exemption. Examples of those exemptions are those that protect confidential financial information or personal privacy interests.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials (except unfair labor practice charges and representation petitions) by E-Filing (not e-mailing) through our website, <u>www.nlrb.gov</u>. However, the Agency will continue to accept timely filed paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a> or from an NLRB office upon your request. NLRB Form 4541 offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

JOSEPH F. FRANKL Regional Director

Hoanlef

#### Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).		
CASE NAME DIGNOTORO d/b/a McDonald's  1. EXACT LEGAL TITLE OF ENTITY (As filed with State and/or stated in legal documents forming entity)  2. TYPE OF ENTITY  [] CORPORATION [] LLC [] LLP [] PARTNERSHIP [] SOLE PROPRIETORSHIP [] OTHER (Specify)  3. IF A CORPORATION or LLC  A. STATE OF INCORPORATION OR FORMATION OR FORMATION OR FORMATION  B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES OF FORMATION  4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS  5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR  6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).		
2. TYPE OF ENTITY  [ ] CORPORATION [ ] LLC [ ] LLP [ ] PARTNERSHIP [ ] SOLE PROPRIETORSHIP [ ] OTHER (Specify )  3. IF A CORPORATION or LLC  A. STATE OF INCORPORATION OR FORMATION OR FORMATION  B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES OR FORMATION  4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS  5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR  6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).		
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<ul> <li>5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR</li> <li>6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).</li> </ul>		
<ul> <li>5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR</li> <li>6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).</li> </ul>		
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6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).		
7. A. PRINCIPAL LOCATION: B. BRANCH LOCATIONS:		
8. NUMBER OF PEOPLE PRESENTLY EMPLOYED		
A. Total:  B. At the address involved in this matter:		
9. DURING THE MOST RECENT (Check appropriate box): [ ] CALENDAR YR [ ] 12 MONTHS or [ ] FISCAL YR (FY dates ) YES NO		
A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value.		
\$  B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods		
valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided.		
\$		
C. If you answered no to 9A and 9B, did you <b>provide services</b> valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If		
less than \$50,000, indicate amount. \$  D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate		
amount. \$  E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who		
purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount.		
F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate		
amount. \$  G. Did you purchase and receive goods valued in excess of \$50,000 from enterprises who received the goods directly from points		
outside your State? If less than \$50,000, indicate amount. \$ H. Gross Revenues from all sales or performance of services (Check the largest amount)		
[] \$100,000 [] \$250,000 [] \$500,000 [] \$1,000,000 or more If less than \$100,000, indicate amount.		
I. Did you begin operations within the last 12 months? If yes, specify date:		
10 ARE YOU A MEMBER OF AN ASSOCIATION OR OTHER EMPLOYER GROUP THAT ENGAGES IN COLLECTIVE BARGAINING?		
[ ] YES [ ] NO (If yes, name and address of association or group).		
11. REPRESENTATIVE BEST QUALIFIED TO GIVE FURTHER INFORMATION ABOUT YOUR OPERATIONS		
NAME I TILE I E-MAIL ADDRESS I TEL NUMBER		
NAME TITLE E-MAIL ADDRESS TEL. NUMBER		
NAME  TITLE  E-MAIL ADDRESS  TEL. NUMBER  12. AUTHORIZED REPRESENTATIVE COMPLETING THIS QUESTIONNAIRE		

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.

### **UNITED STATES OF AMERICA**

#### BEFORE THE NATIONAL LABOR RELATIONS BOARD

(b) (6), (b) (7)(C) D/B/A MCDONALD'S			
Charged Party			
and	Case 20-CA-097727		
CAMERON ELLSWORTH			
Charging Party			
AFFIDAVIT OF SERVICE OF CHARGE AGAINST EMPLOYER			
I, the undersigned employee of the National Labor Rela February 5, 2013, I served the above-entitled document following persons, addressed to them at the following a	(s) by post-paid regular mail upon the		
D/B/A MCDONALD'S 817 LEISURE TOWN RD VACAVILLE, CA 95687-9461			
	Susie Louie, Designated Agent of NLRB		
Date	Name		

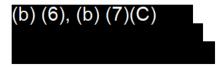
/s/ Susie Louie

Signature

REGION 20 901 MARKET ST STE 400 SAN FRANCISCO, CA 94103-1738

Agency Website: www.nlrb.gov Telephone: (415)356-5130 Fax: (415)356-5156

February 5, 2013



Re: (b) (6), (b) (7)(C) d/b/a McDonald's Case 20-CA-097727

Dear(b) (6), (b) (7)(C)

The charge that you filed in this case on February 5, 2013 has been docketed as case number 20-CA-097727. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge will be investigated by Field Examiner ALAINA GIBSON whose telephone number is (415)356-5184. If the Board agent is not available, you may contact Supervisory Attorney CHRISTY KWON whose telephone number is (415)356-5175.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <a href="www.nlrb.gov">www.nlrb.gov</a>, or at the Regional office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

Presentation of Your Evidence: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Procedures:</u> We strongly urge everyone to submit all documents and other materials (except unfair labor practice charges and representation petitions) by E-Filing (not e-mailing) through our website www.nlrb.gov. However, the Agency will continue to accept timely filed

paper documents. Please include the case name and number indicated above on all your correspondence regarding the charge.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website www.nlrb.gov or from the Regional Office upon your request. *NLRB Form 4541, Investigative Procedures* offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

JOSEPH F. FRANKL Regional Director From: Gibson, Alaina

**Sent:** Friday, April 12, 2013 12:30 PM **To:** 'nancy@bashamlawgroup.com'

**Subject:** 20-CA-97727L d/b/a McDonald's

**Attachments:** WDL.20-CA-097727.pdf

Ms. McCoy,

I am in receipt of your position statement in this matter. However, on February 19, 2013, the Regional Director approved Charging Party's withdrawal request, and the case has been closed. I have attached the withdrawal letter for your records.

Please let me know if you have any questions.

Thanks,
Alaina K. Gibson

National Labor Relations Board, Region 20

901 Market Street, Suite 400

San Francisco, CA 94103

**2** 415.356.5184 **4** 415.356.5156

www.nlrb.gov

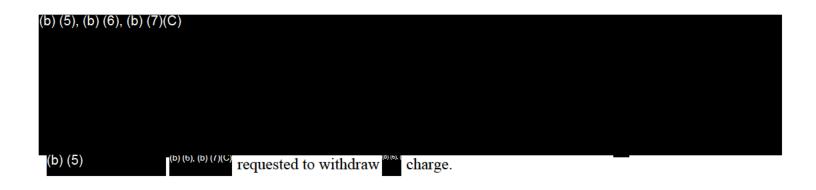
Case Number: 20-CA-97727

### MEMO

DATE	CONTACT
2/7	CP
LM re charge.	
DATE	CONTACT
2/7	CP
CP is a(b) (5), (b)	will get back to me

Case Number: 20-CA-97727

### MEMO TO FILE



### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### WITHDRAWAL REQUEST

In the matter of

(b) (6), (b) (7)(C)

2/0/2 McDanzids

Date 2-13-13

20-CA-97727

This is to request withdrawal of the charge in the above case. (b) (6), (b) (7)(C)

(Name of Party Filing)

By (Name of Representative)

(Title)

Regional Director

National Labor Relations Board

Withdrawal request approved



# UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 20 901 MARKET ST STE 400 SAN FRANCISCO, CA 94103-1738

Agency Website: www.nlrb.gov Telephone: (415)356-5130 Fax: (415)356-5156

February 19, 2013

D/B/A MCDONALD'S 817 LEISURE TOWN RD VACAVILLE, CA 95687-9461

Re: (b) (6), (b) (7)(c) d/b/a McDonald's Case 20-CA-097727

Dear (b) (6), (b) (7)(C)

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

/s/ J Frankl

JOSEPH F. FRANKL Regional Director

cc:

(b) (6), (b) (7)(C)